



UNIVERSITY OF
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School

ENTREPRENEURING AND EMANCIPATION IN AT-RISK SOCIAL GROUPS: CHALLENGES AND WAYS FORWARD

CENTRE FOR ENTREPRENEURSHIP



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Lee Wainwright is completing a PhD at the Management School, exploring how through the process of entrepreneurship, people in at-risk situations can make positive changes. From previous work within the support sector Lee brings a personal passion to his research.

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Professor Muñoz is the Director of the Centre for Entrepreneurship, his research examines how, why and with what consequences entrepreneurial individuals and communities address wicked problems and create societal and ecological value through business activities; with or without economic return. It focuses on two areas: entrepreneurship, society and ecology and entrepreneurship in the periphery.

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FOREWORD

JAMES TIMPSON

"It's often the strangest and most out there ideas that provide the greatest rewards and none more so than James's maverick approach to recruitment. Working closely with the prison service, Timpson's are able to identify potential candidates within prisons who have the right kind of personality to make it on release working within the business. It's a closely managed process from selection, training and mentoring up to release, with the opportunity to secure employment with the Company from walking out the gates. 10% of Timpson colleagues were recruited directly from prison.

James previously Chaired the Employers Forum for Reducing Reoffending (to which Timpson's remains a member), which is a group of likeminded employers who offer a second chance to people with a criminal conviction. EFFRR members actively encourage other employers to be more willing to recruit ex-offenders and are on hand to help guide businesses along the way to help maximize the success of any placements."

[<https://www.timpson.co.uk/about/meet-the-timpsons>]

"To thrive businesses need the best people it can find. For prison leavers to thrive they need a home, someone to look out for them, and a job. I do the job bit.

Recruiting people from prison has been one of the best decisions, both ethically and commercially, that we have ever made.

I just wish more companies would act and recruit ex offenders. This report brings to light the central challenges facing services who work with at-risk individuals"

JAMES TIMPSON OBE DL
TIMPSON, CHIEF EXECUTIVE
PRISON REFORM TRUST, CHAIR





INTRODUCTION

"GIVING OUT FOOD PARCELS IS JUST PUTTING A PLASTER OVER A WOUND, BUT IT CREATES A NORMALITY. FOOD BANKS ARE BEING SPOKEN OF AS IF THEY WILL ALWAYS BE HERE. THERE NEEDS TO BE REAL CHANGE..."

Focus Group Service Provider

This report is about at-risk social groups, entrepreneurship and emancipation. It introduces and discusses long-standing challenges facing those organisations supporting the rehabilitation of at-risk social groups and explores the emancipatory role entrepreneurship may play in the process.

We define at-risk social groups as those groups vulnerable to marginalisation from

the accepted norms, values and beliefs of the society they exist within [1]. These groups share the same complex challenges including lack of access to resources, obstructed employment prospects, and poor physical and mental health. Being at-risk may arise from “personal incapacities, disadvantaged social status, inadequacy of interpersonal networks and supports, degraded neighbourhoods and environments, and the complex interactions of these factors over the life course” [2]. Young people in particular can be susceptible to such challenges.

The assessment of young people who are either entering into or remaining within a detrimental state of life circumstances and of risk to vulnerability, is context specific. Young Addaction [3], for example, considers three aspects: i. belonging to a vulnerable group, (e.g. looked after children, school non-attenders, young offenders), ii. social and cultural factors (e.g. high levels of neighbourhood poverty, easy drug availability, high levels of neighbourhood crime), and iii. interpersonal and individual aspects (e.g. family dysfunction, behavioural difficulties, association with peers who use drugs). When it comes to homelessness

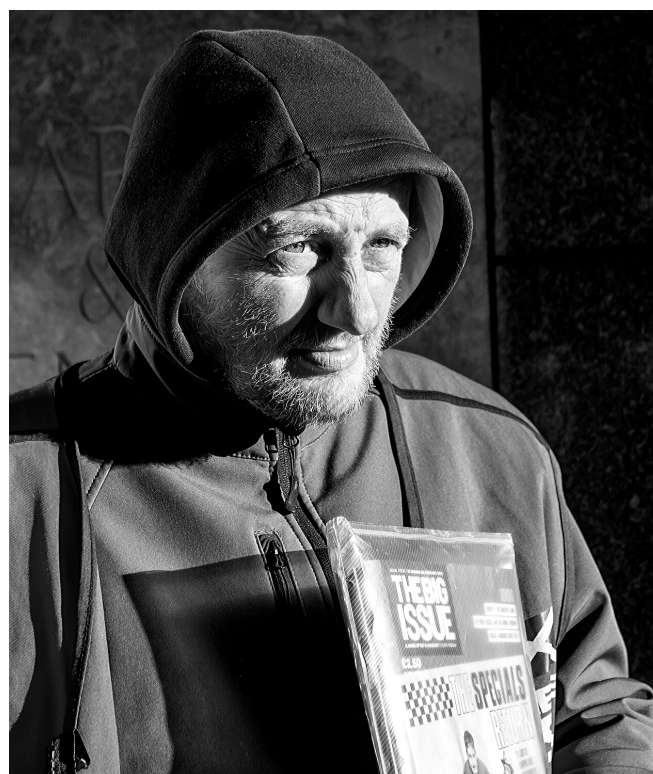
amongst young people, research points towards one parent families combined with low income [4]. Further distinct, for ex-offenders, insecure accommodation, lack of employment and access to drugs have been highlighted as good predictors for becoming at-risk of reoffending [5].

Although the problem is complex and challenging, many charities, voluntary organisations and social enterprises, collectively termed as Third Sector Support Organisations, provide emancipatory pathways as a form of rehabilitation for at-risk groups. Due to the complex needs of supporting at-risk individuals, it is imperative that third sector organisations have the appropriate support and strategy to do so. Today, there are over 160,000 voluntary organisations in the UK [6]. Most of them are small local operations with an average income of less than £100,000. Yet, the sector contributed a total of £17.1bn to the UK economy in 2017.

These organisations and the groups they support face many challenges, and we believe that entrepreneurship, as a human activity and set of skills, has something to say and do. Our conviction stems from collective experience and a growing body of entrepreneurship research [7] seeing entrepreneurial projects as emancipatory efforts. Here, individuals step forward by making use of the entrepreneurial toolkit “to disrupt the status quo and change their position in the social order in which they are embedded—and, on occasion, the social order itself” [8]. This emancipatory view of entrepreneurship has been embraced by practitioners and welcomed by scholars and policy-makers alike, since entrepreneurial

action with a prosocial orientation can potentially lead to positive societal change. It has led to a surge of new ways of understanding, enacting and promoting entrepreneurship in social contexts facing challenging or threatening life circumstances, where individuals, organisations and communities are increasingly using entrepreneurial activity to mitigate, alleviate or overcome social problems.

While this emancipatory understanding of entrepreneurship is relevant and timely, many questions remain unanswered, particularly in terms of how it is enacted, by whom and with what consequences towards the at-risk individual. To answer these questions and provide guidance as we move forward, we need to first understand the continuous challenges facing organisations which support at-risk social groups in the process of stepping forward, out of detrimental life-circumstances.





To discover and systematise the challenges facing these organizations and their beneficiaries, we met with five service providers working across the north west region of the UK. To gain a broad opinion across service provision and thus avoid single provision specific trends, we invited providers who work to support: reemployment, drug addiction, ex-offenders, homelessness and young people out of education, employment and training. In a 4-hour workshop, we facilitated an in-depth discussion about the current difficulties their service faces in providing rehabilitative or emancipatory support to service users. We focused specifically on challenges to emancipatory work, as the process through which at-risk social groups may overcome difficult life circumstances. Service providers were tasked with independently reflecting on current challenges to their service provision and those faced by their beneficiaries in the process of overcoming their problems. These were shared, discussed and clarified further in follow-up group discussions. Through several stages of critical reflection, several themes were collectively identified: stigmatisation, users' awareness and

and perception, funding, social acceptance, public scrutiny, misalignment with policy agenda, measurement and morality. The group of participants then organised, systematised and clustered these insights into five main themes. In a final stage, we returned to the workshop participants with the aims of corroborating evidence, checking the accuracy of our interpretations and further enriching and refining our findings. In parallel, we engaged in a conversation with six new organizations who offered further insight into each of the themes.

“AT MERSEYSIDE REFUGEE SUPPORT NETWORK (MRSN) WE HELP OVER 300 REFUGEE CLIENTS PER YEAR TO MOVE ON WITH THEIR SOCIAL AND ECONOMIC INTEGRATION AFTER THE GRANT OF LEAVE TO REMAIN. EMPOWERING INDIVIDUALS TO MOVE FORWARD WITH THEIR LIVES IS ESSENTIAL AND WE KNOW MANY INDIVIDUALS WHO HAVE CHOSEN SELF-EMPLOYMENT AS A ROUTE OUT OF THE BENEFITS SYSTEM AND THE “LEARNED HELPLESSNESS” THAT THE ASYLUM PROCESS CREATES”

Seána Roberts, *Manager MRSN*

TABLE 1. WORKSHOP PARTICIPANTS

PARTICIPANT	ORGANISATION
Paul O'Brien*	Micah
<i>Executive Director</i>	<i>Sector: Reemployment</i>
Chloe Hutchinson*	The Basement Advisory Centre
<i>Transition Coach</i>	<i>Sector: Homelessness</i>
Kayah Al Mayman*	Young Addaction Liverpool
<i>Young Persons' Worker</i>	<i>Sector: Addiction Support</i>
Rachel Willoughby*	Inside Connections Support CIC
<i>Operations Manager</i>	<i>Sector: Ex-Offender Support</i>
Claire McKeown*	Young Persons Advisory Service
<i>Children and Young People's Wellbeing Practitioner</i>	<i>Sector: Mental Health and Wellbeing support</i>
Merseyside Youth Association ^	<i>Sector: Youth Engagement and Inclusion</i>
Merseyside Refugee Support Network ^	<i>Sector: Refugee Support</i>
Asylum Link Merseyside ^	<i>Sector: Asylum Seeker Support</i>
Genie in the Gutter ^	<i>Sector: Mental Health</i>
Anfield Boxing Club ^	<i>Sector: Anti-Knife Crime</i>
Whitechapel Homeless ^	<i>Sector: Homelessness</i>

* WORKSHOP PARTICIPANT, ^ FOLLOW-UP ONLY

Perhaps not surprisingly included are areas relevant to all third sector organisations such as funding and government support. What is surprising however is the repeated inclusion of other themes more indicting of wider society and its treatment of at-risk groups. These challenges can be experienced throughout the rehabilitative ecosystem creating obstacles to the delivery, access and facilitation of a truly emancipatory stepping forward process. We label this set of challenges as **START: Stigma, Tangible knowledge, Resource Alignment, Recognition, and Moral Treatment**.

Through our analyses and subsequent discussions with service providers, we explored and systemised these five challenges, curious to discover how and when they impact upon emancipatory

pathways and the wider support environment. As a result of this investigation, we identified four levels to which the challenges have influence and impact:

- i. the individual who steps forward
- ii. the process of stepping forward
- iii. the facilitation of stepping forward
- iv. the context the above three are situated within

Placing these START challenges alongside the multiple levels of impact enables the emergence of a range of new questions, which we explore in this report. And in doing so, it brings to light the interconnected and obstructive situations which detract and prevent service providers from effectively facilitating the stepping forward process. In the following section we elaborate on each of the challenges and how they materialise in each of the levels.



CHALLENGES TO EMANCIPATORY ACTION

STIGMATISATION

“OF THE ROUGHLY 82,000 PRISONERS ALL BUT A SMALL PROPORTION OF THOSE WILL BE RELEASED. THAT INCLUDES PEOPLE WHO HAVE BEEN COMMITTED OF A SEXUAL OFFENCE, AND WITHIN THAT CATEGORY ARE 17 YEAR OLD LADS WHO HAVE SLEPT WITH THEIR 15 YEAR OLD GIRLFRIEND WHO THEY’VE BEEN WITH FOR TWO YEARS. BUT ALSO WITH THEM ARE SERIOUS SEX OFFENDERS. THERE NEEDS TO BE AN ELEMENT OF COMMON SENSE TO UNDERSTAND THAT DESPITE THEIR LABELLING, THEY ARE DIFFERENT CASES. YET THEY ARE VIEWED BY SOCIETY UNDER THE SAME UMBRELLA, THE SAME FOR ‘HOMELESSNESS’ FOR ‘ADDICTION’. WE CAN’T DECIDE WHO GETS SUPPORT AND WHO DOESN’T BASED ON LABELLING WHICH IS WHAT CURRENTLY AFFECTS MORAL PERCEPTION.

Focus Group Service Provider

The first salient challenge facing service delivery organizations and at-risk groups is stigmatisation. Stigma is a concept made up of interrelated elements of “labelling, stereotyping, separation, status loss, and discrimination” ... stigma can have a substantive impact on many areas of a

person's life such as income, housing, and health.” [9] Stigma is recognised as complex in nature. It resides and interacts across the rehabilitative ecosystem in unique ways and it does not exist in isolated silos of experience.

At the level of the at-risk individual, we notice a self-identification with the negative traits of their particular detrimental circumstance, where the stigma becomes personally relevant. This occurs as the very process of seeking support from a service provider requires the at-risk individual to be self-aware of their detrimental circumstances. However as the individual has been raised in a society which deems the cause for their particular support need as incongruent to the norms, values and beliefs of society (e.g. to be addicted to drugs), the individual is also aware of the negative connotations their self-labelling implies. The concept of self-stigma does not appear in isolation without societal context. Self-stigma is a learnt mindset, enforced by the context the at-risk individual resides within. Self-stigma is a challenge to service providers as for the at-risk individual to seek

support, they have to overcome the fear of 'outing' themselves to their community.

The process of receiving rehabilitative support for at-risk individuals has been described by service providers as a potentially dehumanising process. This is not to imply that organisations are actively seeking to detrimentally impact upon at-risk individuals. Rather the process of rehabilitation affirms the self-stigmatisation for the individual through the 'othering' narratives enforced by society and institutions. As exemplified with individuals with addiction issues, rather than being perceived as a medical disease or mental health issue, often addiction is viewed as a wilful choice. This is illustrated with the separation from mainstream health provision, via treatment existing outside of the medical system; of how rather than being described as a person 'suffering from...', rather people are labelled as 'addicts'. The process of 'othering' an at-risk individual helps to conceptually and physically distance them from acceptable society, diminishing relationships to community and in turn promoting structures of inequality [10]. They exist within a 'zone of uninhabitability' where they have no status in social life [11]. These extra barriers and challenges placed upon individuals progressing through rehabilitation, contribute to the level of dropouts not able to complete their programme of support, in turn maintaining the revolving door system of support.

“SOCIETY LOVES TO HAVE EXTREMES LACKING NUANCE, WE LOVE TO HEAR ABOUT THE MASS MURDERER RATHER THAN THE PERSON WHO IS INSIDE OR SHOP LIFTING A LEG OF LAMB. IT'S VERY BLACK AND WHITE.”

Focus Group Service Provider

At the level of facilitation, service providers emphasise that the individual, as they seek emancipation, are often reduced to the label of the condition or circumstance. As one service provider described it, the public is more interested in the fact a person is homeless than the homeless person. The challenge presented by such a conflicted societal context for service providers lies in the shifting fashionability and popularity of specific stigmas at certain times, driving public concern and government funding towards niche reactionary strategies. For the service provider this results in root cause treatment never being firmly addressed, symptoms being plastered over, and a continuing cycle of funding chasing.

Considering stigma at the contextual level highlights an obstructive ambiguity regarding awareness and support allocation. A key tool for disseminating information to the public, and as such to inform public opinion, is the media. This is the route through which government policies are delivered and discussed, affecting policy development, funding and legal revision. It is also the mirror to which viewer and readership tastes and opinions are reflected back and sold to society. As such although bringing at-risk issues to light allows for policy review and possible action, it does so with the application of stigma to those at-risk groups, as a tool to attract interest and sell news. In doing so the stigmatised are mythologised into folk devils: “people whose very existence is socially constructed as posing a negative challenge and a grave threat to morality and who, as a result, provoke feelings of fear... The construction of such a threat typically exaggerates the supposed moral danger, and those who allegedly present the danger are

typically described as folk devils” [12].

Interest is generated through fear, as by creating folk devils, the media are able to create deviants and victims. Frequently the victim is the readership, or society in general, as such creating a culture of fear, fuelling a need to seek out further information, selling more content [13]. The fostering of stigma in society creates a negative spiral. The 2018/19 Drugs Misuse report [14] informs that 3.2 million people in England and Wales had taken drugs in the last year (p.2), and that a relationship exists between drug use and personal wellbeing. Drug use decreases as personal wellbeing increases. Conversely as personal wellbeing decreases, perhaps due to fear and feelings of adversity within society, drug use increases (p.23).

"WE NEED TO NORMALISE THESE ISSUES AND LABELS TO ALLOW FOR PEOPLE TO BE VIEWED BEYOND THEIR LABEL. THEY MIGHT BE AN 'ASYLUM SEEKER' BUT THEY GO SHOPPING, THEY GET THE BUS, THEY HAVE FAMILY, THEY ARE JUST LIKE ANYONE ELSE. UNTIL NORMALISATION HAPPENS PEOPLE WILL CONTINUE BEING STIGMATISED, AND THE MEDIA DOES NOT WANT TO NORMALISE ISSUES AS IT DOESN'T SELL."

Focus Group Service Provider





CHALLENGES TO EMANCIPATORY ACTION

TANGIBLE KNOWLEDGE

A second key challenge facing service providers and at-risk groups pertains to how tangible knowledge of the situation is for the individual. This often results from a lack of prior awareness regarding the evolving nature of negative events until a crisis point is hit, or sometimes after several have already occurred. The concepts of class and identity are strongly resonant here, illustrated though the effects of alcoholism. As reported by the Office for National Statistics [15], 4.9 million people in the UK drink alcohol on five or more days, nearly 10% of the adult population. Service providers give examples of how middle-class wealthy mothers who can afford to regularly drink socially with family and friends in front of their children, are not deemed as 'alcoholic' or as troubled. But a working-class mother surviving on benefits and low income who is regularly seen drinking in front of their children raises concern and chastisement from family or friends. Neither individual may self-identify as an alcoholic during this process, but when self-awareness does occur and support is needed, often service providers have to support multiple interconnected issues which may include

poor health, homelessness, financial difficulties, social exclusion or unemployment. As such emancipation begins often after multiple crisis events have taken place.

The reaching of a crisis point however does not entail acceptance of an issue. Just as challenging as unpicking and resolving crises, is the nature of the at-risk individual's concept of self and identity. Emancipation requires the transition from a negative state of oppression – whether environmental, societal or ideological – towards a positive state of 'authoring' and of independence. This process cannot occur however if the individual does not recognise the oppression exerting upon their identity. For emancipation to begin, the individual necessarily needs to accept their at-risk status as part of their current identity. For many however this presents a significant ideological challenge due to the externalisation of at-risk groups by society, and often the individual themselves. Which is to say, no one chooses to self-identify as unworthy of society's norms and practices. Rejecting ownership of the at-risk identity is

furthered by stigma the individual perceives from society towards such groups.

“I TRY TO EXPLAIN TO THE SERVICE USERS THAT “YOUR DRUG ADDICTION IS NOT THE PROBLEM, THE REASON FOR YOUR DRUG ADDICTION IS THE PROBLEM”.

IF THE MONEY WAS BEING SPENT ON EARLY INTERVENTION WE WOULDN'T HAVE HALF THE PROBLEMS WE HAVE WITH SERVICE USERS”

Focus Group Service Provider

The impact of the individuals recognition of stigma is exemplified with recent research [16] on ex-offenders, which found that their personal awareness of their own stigmatised status manifested in a belief that their “former prisoner status was obvious rather than hidden” [17] to potential employers, the label comes before the individual. In turn this led ex-offenders to try to manage their stigma and control how much information about their former life was released. Such a prolonged staged disclosure of aspects of the individual's identity over time leads to a transition, from self-stigmatisation to one of eventual disassociation from their past. Without appropriate support however, this can be a prolonged process during which mental health and wellbeing can be significantly negatively affected, in turn expanding the opportunities for reoffending. Barriers to the success of this emancipatory process depend upon how deeply rooted the initial self-stigma resides as a form of embedded identity.

The challenge for service providers lies in the reactive nature of working with individuals only once they are presented as such. This is opposed to being proactively aware of those within their community who are at-risk of requiring support, and more importantly supporting individuals as the root causes of such events unfold, parental divorce for example, low school attendance, petty crime, unemployment etc. Without supporting individuals at the causal stage, service provides continue a reactionary cycle, only treating those symptoms for which they are funded, and only within the time the individual stays at their service, whilst open to the possibility of repeat behaviour and negative events from the individual, perpetuating the revolving door of support.

At the societal level, tangible knowledge of at-risk issues and groups may be obscured by local context and place. For example the 2018-19 UK Personal Well-being survey [18], reports how Liverpool consistently appears in the bottom 10% of all regions when measured across all aspects of personal wellbeing (life satisfaction, anxiety, happiness and worthwhile). The English Indices of Deprivation 2019 report [19] also places Liverpool as one of only five local authorities with persistently the highest proportions of neighbourhoods among the most deprived in England since 2015. As such it is possible that a community with low well-being and suffering from high deprivation, has lower awareness of poor well-being amongst its members, inwardly focussing on immediate personal well-being and financial concerns. However, due to the excessive representation of at-risk groups on a national level, such a community may have a

more confident yet skewed general perspective of national at-risk issues. It is here that a support paradox occurs. In an attempt to shine a light on and identify the 'vulnerable' within a community and as such become aware and knowing of who requires support (whether intended or not), society aids in perpetuating the socially constructed folk-devil threat, reducing any value the at-risk individual may hold.

“WE NEED TO NORMALISE THESE ISSUES AND LABELS TO ALLOW FOR PEOPLE TO BE VIEWED BEYOND THEIR LABEL. THEY MIGHT BE AN ‘ASYLUM SEEKER’ BUT THEY GO SHOPPING, THEY GET THE BUS, THEY HAVE FAMILY, THEY ARE JUST LIKE ANYONE ELSE. UNTIL NORMALISATION HAPPENS PEOPLE WILL CONTINUE BEING STIGMATISED, AND THE MEDIA DOES NOT WANT TO NORMALISE ISSUES AS IT DOESN’T SELL.”

Focus Group Service Provider

Tabloids reflect the views of their readership within society. A recent study [20] reviewed 19 UK national newspapers from 2006 to 2015 to capture reference to migrants, refugees and asylum seekers. The authors found the framing and labelling used by newspapers substantially dictated the public perception. When referred to as 'highly-skilled workers', the perception of immigrants "coming to Britain to seek asylum or as residing in Britain illegally" was less likely. Indeed, using

the phrase 'highly skilled' migrants even led to reduced perceptions of immigration populations in the UK.

Possibly more concerning is research conducted by Matthews and Brown [21] into the tabloid portrayal of asylum seekers. They concluded that not only did tabloids act as 'claims makers' citing reference to asylum seekers as either "economic migrants or dangerous enemies within the UK – preaching and/or plotting terrorism", but that despite tabloids not existing as campaign groups, they still carried the same if not greater weight in affecting government policy. Obviously UK tabloids do carry their own political agendas, these are however agendas bought into and supported by their readership.

This is the paradox for providing support, as the more aware and knowing society is of an at-risk group, the more inclined it is to reduce support.





CHALLENGES TO EMANCIPATORY ACTION

RESOURCE ALIGNMENT

"IF YOU'RE COCKTAIL FUNDED, YOU HAVE TO DO THE SAME PAPERWORK MULTIPLE TIMES WHICH CAN BE A NIGHTMARE. YOU CAN GET KNOCKED BACK FOR SMALL THINGS, WE'VE BEEN REJECTED DUE TO THE STREETS THE PROVISION COVERS WASN'T THE RIGHT STREETS."

Focus Group Service Provider

The process of seeking and gaining funding for service providers and at-risk groups is a nuanced and complex matter, revolving around the relationship between funding bodies, bid writers and service delivery targets. Funding for service providers can come from many bodies, with various funding application procedures, time-frames and criteria. Often service providers have to strategically navigate and build up funding mixes to meet delivery needs, all the while aware that funding available today is not guaranteed for tomorrow, as such applications are reactive, reflecting which

type of funding is available [22], rather than explicitly being funded for the services' overall requirements. In this manner policy and pre-defined targets are what drives funding, with successful practitioners ensuring long term provision through aligning the needs of at-risk groups to policy agendas and measurable outcomes.

An interesting example of the latter is the perceived surge of knife crime across the UK in 2019, as portrayed in the media. Offences of this kind did go up 6% in 2018 [23], however the rates of life-threatening knife crimes resulting in homicides have remained stable in the UK for the last four decades [24]. A similar moral panic regarding youth gangs and knife crime consumed the UK media a decade ago. Research in 2010 [25] on the reality behind the "knife crime" debate is eloquent in that regard: "whilst some marginalised young people in the UK are carrying knives, the image of violently nihilist, feral, often Black or Minority Ethnic teen gangs armed with knives and guns is, at best, only a snapshot of the grim reality for a very small minority. At worst, this kind of imagery ... leads to a punitive and misguided



"ALL SERVICES ARE SET UP TO A NEED AT A POINT IN TIME. BUT WHAT HAPPENS IS WHEN YOU GO FOR FUNDING IT NEVER QUITE ALIGNS WITH YOUR NEED, SO YOU ALWAYS HAVE TO CHANGE TO MEET THE FUNDING NEED. WHICH MAKES IT DIFFICULT TO CONTINUE THE SERVICE YOU PROVIDE. FUNDING PROVIDERS RATHER THAN THE FRONT LINE STAFF ARE DECIDING WHAT SERVICES ARE NEEDED."

Focus Group Service Provider

political climate which may ultimately fail the very teenagers it aims to reach" [26]. A decade later poverty and racial inequality within those aged under 25 years old are still considered as key indicators to the development of knife crime and at-risk groups [27]. However, the root causes of knife crime are continually underfunded, with at-risk young people frequently facing cuts to funding in the form of reductions for youth services and Youth Offending Teams [28].

We therefore identify a tension between public opinion, political agendas and social realities. At the contextual level these combined pull in various directions as an evolving, amorphous construct, affecting service providers and at-risk groups through short term funding policy, from four year governments, reacting to perceived public opinion, which in turn influences policy [29]. The consequence of this process is outcome narrowness regarding facilitation provision, and of the directed focus for who gets facilitated to affect change.

For service providers this depicts a heavily top-down approach to funding agenda provision.

Such reactionary and barricaded facilitation has very real impacts upon service provision regarding not just operational overheads but the service objectives and processes too. To keep afloat with funding applications some service providers report how despite the at-risk issue they support remaining as present and critical for individuals, they have to adjust operational and service delivery aspects to meet funders requirements. This shifting of services has significant

consequences for the at-risk individual. The act of seeking support via engagement with an institution requires acceptance and acknowledgement of a personal crisis and a need for emancipation, which may occur after a prolonged process of personal degradation and a conscious rejection of societal values. Success therefore for service providers can sometimes be measured through the simple act of an at-risk individual building up the courage and strength to make an initial appointment. This is an extremely fragile relationship however with failure and relapse to at-risk scenarios highly likely. As such the impact of funding cuts and service provision withdrawal upon this relationship can be extremely detrimental, even to the extent that the individual gains 'evidence' of society's incongruence towards them, reinforcing self-stigma and a rejection of further institutional support. The individual and collective at-risk group receives a message from society that they and their difficulties are no longer a priority. Effectively a misalignment occurs between the focus of the rehabilitation process and the stepping forward process which is actually required, with treatment for the root causes of the at-risk groups allowed to slip away, or never actually targeted in the first place, perpetuating the cycle of remaining at-risk.

Finally, the expected change at the individual level is misaligned with what is actually needed for at-risk groups to step forward. In this sense, service providers stress how funding limitations extend to postcode remits rather than to the volume and complexity of service users and the support required, resulting in some at-risk

individuals reaching out for support when at a point of crisis, being turned away due to the street they live on not being within the service providers remit. It is not surprising that a lack of trust and care becomes established in the mind of the at-risk individual, perpetuating the self-stigma belief that they are not worthy of support.





CHALLENGES TO EMANCIPATORY ACTION

RECOGNITION

“FOR SOME EX-OFFENDERS IT IS EASIER NOT TO TRY THAN TRY AND FAIL. MANY ARE SCARED INDIVIDUALS WHEN THEY LEAVE PRISON, SCARED OF BEING REJECTED BY SOCIETY.”

Focus Group Service Provider

The concept of recognition and identity for the at-risk individual, is a process which evolves from a pre at-risk to a post at-risk point in time, as identity formation through emancipation experiences ‘labelling’ and hopefully ‘de-labelling’. As such, arguably the processes undertaken by service providers are to ‘de-label’ [30], attempting to remove the negative labels applied to the at-risk individual or group, in seeking to reach a point of “having positive identities reflected back upon the individual by others in society” [31]. Operating as a functioning member of a society requires achieving positive labels, as in doing so the individual can foster social capital, which in turn creates opportunities

for emancipatory pathways, including entrepreneurship and employment. Conversely it is through the application of negative labels that at-risk groups become subject to stigma, marginalisation and a lack of opportunity for social and human capital development. Once marginalised at-risk groups lose, or in the case of asylum seekers in a foreign community, fail to develop social connections, a barrier is formed to integration with society.

The relationship between labelling, marginalisation and identity is a powerful one, with research arguing how with regards to acts of crime, to label someone as an ‘offender’ actively helps to reinforce deviant behaviour for the individual, and to reinforce a perceived sustained amount of risk for further offending, which results in greater stigma and marginalisation [32]. Operating hand in hand with marginalisation and operating across levels is the concept of ‘othering’, “a set of dynamics, processes, and structures that engender marginality and persistent inequality across any of the full range of human differences based on group

identities” [33]. Othering is an expected response in societies experiencing changes. In these situations, people tend to narrowly define who qualifies as a member of society and, in consequence, who does not “Othering is not about liking or disliking someone. It is based on the conscious or unconscious assumption that a certain identified group poses a threat to the favoured group” [34].

At an individual level othering and marginalisation can be viewed with how asylum seekers are often represented within the UK. Once the label of ‘asylum seeker’ is removed, we are left with an individual with history, personality, cultural beliefs, hobbies and interests just as we would with any native individual. However through the official labelling of the asylum process, all of these truths are overshadowed by the label, an asylum seeker is someone who does not yet have asylum, they are not yet granted asylum. As such they have no rights to work, they have no rights to credit, they have no rights to home ownership. It therefore becomes very easy for society to demonise such at-risk groups as seeking to take from society without giving back, in effect proportioning blame for the situation and justifying stigma. As an ‘asylum seeker’ they are necessarily marginalised and prevented access to social capital opportunities. The effect of this process is a development of self-marginalisation, leading to the awareness of being ‘the others’. As this process is protracted and extended, the internalisation of marginalisation develops as a central identity belief, likely resulting in a life crisis. At this stage the individual evolves from being distinct from and possibly opposed to those who make up a stigmatized

group, to an awareness of no longer existing within the societal norms, values and beliefs regarding legitimate behaviour; they become ‘othered’.

The self-identification as a labelled individual (e.g. becoming a drug addict, an asylum seeker, an alcoholic) happens regardless of whether individuals are pushed into an at-risk group (e.g. forced migration and asylum) or become part of it (e.g. recreational drug user in search for rehabilitation triggered by wellbeing concerns). It is at this stage that service providers report a significant challenge for supporting the at-risk individual: not only do they recognise themselves as incongruent to society, but also recognise and internalise society’s incongruence towards them.

"SOME PEOPLE LEAN ON AN ISSUE, IDENTIFYING WITH THE ISSUE AND TAKING IT AS PART OF THEIR IDENTITY. IT CAN BE A DEFENSIVE MOVE TO PREEMPT SOMEONE LABELLING THEM AS SUCH."

Focus Group Service Provider



As they engage with the stepping-forward process, service providers described at-risk individuals as referring to themselves as ‘failures’, ‘worthless’, and as lacking ‘pride’ in themselves as measured against what they perceive as society’s accepted norms and values. The process itself enlarges the effect and risk by means of affiliation. As the facilitation of the process unintentionally portrays at-risk groups as “the others”, some respond by self-actualizing their label and re-identifying with their stigmatized subculture (e.g. homelessness, serial offending), in search for acceptance. Some individuals distanced themselves from society’s legitimate norms and values by creating an opposition mindset, displaying an ‘established lifestyle’ (e.g. of homelessness) and not wanting to experience ‘failure’ while attempting to step forward (e.g. rehousing support). This becomes reprimand avoidance, remaining dismissive of support and developing disdain towards societal convention, with service providers reporting some users describing their experience as an ‘easier lifestyle’.

Attempting to work with such groups is extremely difficult for service providers as it requires the individual, via reaching out to a support provider, to re-engage with an institution operating within the society from which they experienced rejection, and to consciously reject negative social groups which validate their lifestyle. For service providers the concept of motivation to seek support and the development of a sense of purpose for these groups became important in the process of developing a new “replacement self” [35]. In effect the at-risk individual who intentionally wants to step forward out of their negative life circumstances requires a pull towards seeking purpose within legitimate institutions, as opposed to either no sense of direction and purpose (as may be the case with asylum seekers or ex-offenders) or a pull towards an established detrimental lifestyle.

"THE THEMES WE DISCUSSED ARE CONSISTENT AMONGST BOTH STATUTORY AND VOLUNTARY SERVICES. THEY ARE THEMES THAT ARE SO PREDICTABLE THAT IT IS NOW, I FEEL, DANGEROUS WATER WE ARE TREADING ON AS A SOCIETY..."

Focus Group Service Provider



CHALLENGES TO EMANCIPATORY ACTION

MORAL TREATMENT

The concept of moral treatment impacts across all themes and levels. As the individual comes to self-identify with the negative traits affiliated to their particular detrimental circumstances, they engage in the process of self-stigmatisation. In doing so they form a negative perception of themselves as being a 'failure' across various domains – family, employment, education, community. As such although some may find motivation from marginalisation [36] many engage in cutting themselves off from pro-social opportunities and beginning the perpetuated self-fulfilling prophecy of feeling 'doomed to deviance' [37]. Internal beliefs about self-worth become focused around the opinion that "I am wrong", resulting in shame, a self-defeating mindset or self-punitive habits. In the case of offenders, for example, research [38] highlights how there are two forms of shame. First, a reintegrative (with the criminal act regretted but internal self-worth maintained) and stigmatized shame (with both the act and actor degraded). The effect of stigmatized shame is described as making the individual "unlikely to respond well to deterrent or rehabilitative efforts" [39].

Without the appropriate contextual and environmental support (pathways, family, prosocial institutions etc) the at-risk individual is likely to see the process of emancipation as an attempt to right a sense of wrongness rather than a positive opportunity for stepping forward, which can be counterproductive in the context of emancipatory action. Service providers describe how a key challenge to at-risk individuals who reach a stage of seeking change and gaining purpose, concerns their perspective that through accessing support, they are consciously raising their head above the perceived parapet and signalling to the world that they are indeed what they presumed everyone knew they were. This is to say, only an addict would access addiction support and addicts are judged as deviant, thus validating the self-stigma and moral sense of wrongness. In other words, while the process involves acknowledging and overcoming deviance, this same acknowledgement perpetuates the sense of moral wrongness, thus a paradox of acceptance occurs for the individual, of emancipation through self-denigration.

At the contextual level, service providers describe how the effect of ‘othering’ by society pushed both the acts and actors away, towards being situated outside of the accepted norms and values. Unless supporting at-risk groups offered opportunities for virtue signalling or tokenistic funding, service providers reported how the emancipation of at-risk groups was universally seen as ‘someone else’s problem to fix’. And by ‘someone else’, collectively this referred to someone outside of their community, of the process being undertaken away from the majority within society, exemplified with comments such as “You might give money to an addict on the high street, but would you be happy if one moved in next door to you? Everybody has lines of what is socially acceptable” and “Many businesses will have CSR policies, but most will also have an issue with homeless people outside their property. They like to be seen to be doing the CSR policy.”

"IF YOU'RE A BUSINESS PERSON AND SOMEONE APPLIES FOR A JOB DISCLOSING THEY WERE PREVIOUSLY HOMELESS, THE INSTANT THOUGHT IS "DO I WANT A HOMELESS PERSON AS PART OF MY TEAM?", IT'S NOT WORTH THE HASSLE"

Focus Group Service Provider



In cases where at-risk individuals are supported by society (i.e non-service providers), the moral compass employed by societal members could be positively swayed, with perception realigned from viewing the individual as wrong, to viewing them as helpless, mis-informed or vulnerable. The concept of applying vulnerability to an individual is a sophisticated labelling process, as rather than simply being viewed as a ‘wrong doer’, the organisation/public can not only take a moral superiority but still apply a sense of blame to the individual [40] Blame is developed as to be vulnerable infers an inherent malformed intrinsic personal characteristic. When combined with a vulnerable situation, this allows for an individual to be subject to malign intentions or influence. Summed up in the case of adult welfare, Pritchard eloquently explains “That is, the impairment or status is a precursor to, and the reason for, the risk of abuse or neglect” [41].



THE POTENTIAL OF EMANCIPATORY ENTREPRENEURING

Each of the challenges discussed are problematic in and of themselves, combined however they create areas of wider concern. Through acting in conjunction with each other, each challenge is reinforced and augmented, exacerbating the detrimental effects experienced by at-risk groups. Through combination, perpetuation of a self-reinforcing cycle of the challenges becomes established for the at-risk groups, leading to a larger risk of a self-fulfilling prophecy, with individuals denied opportunities for emancipation.

Here, we believe, emancipatory entrepreneuring has an ability to break this self-fulfilling cycle, through the use of entrepreneurial skills and practices to mitigate, alleviate or overcome social problems for opportunity creation.

We embrace the notion of entrepreneuring because it is one that goes beyond the sole pursuit of opportunities for economic gain. It is about using change-oriented activities and projects with the aim of overcoming or removing perceived constraints in the individuals' environments. It is about seeking

autonomy, impetus, breaking free from authority, removal of constraints and making declarations about the intended change [42].

It is an alternative type of entrepreneurial endeavour, prosocial in nature, that has become prominent in social contexts facing challenging or threatening life circumstances. This approach has been welcomed by scholars and policy-makers alike, since it can potentially bring about new economic, social, institutional, and cultural environments, leading to positive societal change. Entrepreneuring may evolve into self-employment, sole-trading or start-up activities, yet it is not assumed this to be a necessary outcome that would determine the success of the stepping forward process.

However, despite the promising potential of entrepreneurship in this context, our current knowledge and practices seem insufficient to tackle the challenges discussed above. Entrepreneurship research has paid too much attention to entrepreneurial dynamics, in a sort of theoretical vacuum, disregarding the complexity of social problems and influence of broader life circumstances. We

argue that the materialisation of this promise will be possible if we, researchers and practitioners, seriously engage with the many questions that remain unanswered at the intersection of at-risk social groups, entrepreneurship and emancipation. This requires a systematic mapping of areas of inquiry and development, and the new practice-based research agenda.

Looking across challenges and levels, we identified 20 areas of action, each in themselves challenging as they bring forward unanswered questions. These questions are of practical and conceptual importance. For practitioners, they offer a systematised view of their daily challenges and a map to navigate through them. They also constitute an invitation to explore how can they use entrepreneuring to develop, test and implement innovative ways of organising, delivering interventions and thinking about the stepping-forward process. We believe entrepreneuring is a legitimate and potentially powerful mechanism for service providers, and the at-risk groups they support, to tackle the challenge they face. A wondering into “how can entrepreneuring contribute to their work...” should ignite collective action. For researchers, these areas of action and questions are novel spaces of inquiry and calls for new knowledge products, which should be able to close critical gaps in the literature regarding the emancipatory role of entrepreneurship in supporting at-risk groups in the process of stepping forward.





This report is about at-risk social groups, entrepreneurship and emancipation. From an initial focus group session with front line service providers we have been able to identify five long-standing key challenges facing those organisations who support the rehabilitation of at-risk social groups.

Defined as social groups vulnerable to marginalisation from the accepted norms and values of society, at-risk groups, although distinct in the naming of their labels, suffer from the same overlapping issues. When it comes to being defined by a label, the stigma which follows does not limit itself, a homeless person can be an asylum seeker dealing with drug addiction issues. An ex-offender can be suffering from mental health issues whilst on the verge of becoming unemployed. Often these labels are hidden until a detrimental context is applied, the individual walking around the city centre is not publicly known to be a street beggar, the label only becomes visible once the act of begging in a public space occurs. The individual with a recreational drug habit is not an addict until others begin to notice detrimental behavioural effects.

Suffice to say that the at-risk individuals we imagine are never the *true and full story*, all of us are at times vulnerable to being at-risk, and at times *are at-risk*. The challenges identified are relevant to all of society, as society is both the cause and victim of being at-risk and oppressed by the detrimental context.

Facilitating real emancipation out of such circumstances requires tangible, effective pathways. Through discussion within this report regarding the strength of these challenges, such pathways need to be capable of meeting the challenges directly, forming a solid guiding path for those in need to follow. Such pathways need to give people *opportunity* to create human capital, opportunity to enact adherence to societal values, to gain purpose, and in doing so to re-label themselves as their own author, emancipated from detrimental circumstances.

Here we believe is the opportunity for emancipatory entrepreneuring, with a call for further investigation into entrepreneurial pathways for at-risk groups.

START Framework

	INDIVIDUALS IN THE PROCESS OF STEPPING-FORWARD	PROCESS OF STEPPING-FORWARD	FACILITATION OF STEPPING-FORWARD PROCESS	CONTEXT OF STEPPING-FORWARD
S	STIGMATISING C: Break the self-stigmatisation cycle Q: How can entrepreneurship contribute to breaking the self-stigmatisation cycle?	DEHUMANISATION C: Re-humanisation of the stepping forward process Q: How can entrepreneurship facilitate a re-humanisation of this process?	LABELLING IN REHABILITATION C: Negative labelling in rehabilitation Q: How can entrepreneurship contribute to relabelling the transition out of at-risk circumstances?	PARADOX OF PUBLIC STIGMATISATION C: Break the dual effect of visibility Q: How can entrepreneurship break the dual effect of bringing the process of stepping forward to the public?
T	TANGIBLE KNOWLEDGE C: Early acknowledgment of the at-risk situation Q: How can entrepreneurship enable an earlier visualisation of the at-risk situation?	AT-RISK OWNERSHIP C: Sense of ownership over the at-risk situation Q: How can entrepreneurship increase the sense of ownership over the at-risk situation?	PROACTIVE KNOWLEDGE C: Proactive awareness of an issue requiring support Q: How can entrepreneurship expand the scope of action of service providers?	PARADOX OF PUBLIC KNOWLEDGE C: Decouple public awareness and support for stepping forward Q: How can entrepreneurship break the counterproductive effect of public awareness?
A	RESOURCE ALIGNMENT MISALIGNMENT IN QUALIA OF INDIVIDUAL CHANGE C: Reconcile nature of individual change with resource allocation cycles and logic Q: How can entrepreneurship contribute to reconciling the nature of individual change with resource allocation cycles and logic?	MISALIGNMENT IN ORIENTATION OF THE PROCESS C: Reconcile stepping forward process orientation with resource allocation cycles and logic Q: How can entrepreneurship contribute to reconciling operational requirements with resource allocation cycles and logic?	MISALIGNMENT IN OUTCOME OF FACILITATION C: Reconcile operational requirements and intended outcomes with resource allocation cycles and logic Q: How can entrepreneurship contribute to reconciling operational requirements with resource allocation cycles and logic?	TENSIONS IN PRIORITISING C: Reconcile policy priorities with service provision priority outcomes Q: How can entrepreneurship contribute to reconciling policy agendas and service provision outcomes?
R	"WE ARE THE OTHERS" C: Minimise self-marginalisation Q: How can entrepreneurship contribute to counteracting self-marginalisation?	SPIRAL DOWN BY AFFILIATION C: Avoid deviant thinking Q: How can entrepreneurship counteract a spiralling down into deviant thinking?	RECOGNITION OF REPLACEMENT SELF C: Construct direction, purpose and replacement self Q: How can entrepreneurship contribute to constructing new sense purpose and replacement self?	SOCIETAL INCONGRUENCE C: Construct legitimate replacement self in situation of societal incongruence Q: How can entrepreneurship construct a legitimate path forward facing situation of societal incongruence?
T	"I AM WRONG" C: Change self-punitive mindset and habits Q: How can entrepreneurship facilitate a change away from self-punitive mindset?	PARADOX OF RIGHTING A WRONG C: Decouple recognition of at-risk from sense of moral wrongness Q: How can entrepreneurship bring at-risk to light whilst minimising the sense of moral wrongness?	VALIDATION OF SENSE OF WRONGNESS C: Legitimate restorative stepping forward in the absence of moral judgement Q: How can entrepreneurship restore at-risk situation whilst minimising moral judgement?	MORAL EXCLUSION C: Inclusive recognition of vulnerability Q: How can entrepreneurship enable a more inclusive recognition of vulnerability, against societal moral exclusion?



REFERENCES

- [1] Webb, J.W. et al., 2009. You Say Illegal, I Say Legitimate: Entrepreneurship in the Informal Economy. *The Academy of Management Review*, 34(3), 492–510.
- [2] Mechanic, D. & Tanner, J. 2007. Vulnerable people, groups, and populations: Societal view', *Health Affairs*, 26(5), 1220–1230. p.1220.
- [3] Aynsley, A., Bradley, R., Buchanan, L., Burrows, N. & Bush, M., 2017. Childhood adversity, substance misuse and young people's mental health, *Young Minds Addaction*. Available at: <https://youngminds.org.uk/media/1547/ym-addaction-briefing.pdf>.
- [4] Shelter (2016) *Green Book 50 Years On*. Available at: http://www.shelter.org.uk/__data/assets/pdf_file/0003/1307361/GreenBook_-_A_report_on_homelessness.pdf.
- [5] Brunton-smith, I. & Hopkins, K. 2013. The factors associated with proven re-offending following release from prison: findings from Waves 1 to 3 of SPCR. Ministry of Justice. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/261620/re-offending-release-waves-1-3-spcr-findings.pdf.
- [6] NCVO 2019. Executive summary | UK Civil Society Almanac 2019. Available at: <https://data.ncvo.org.uk/executive-summary/#the-public-and-government-remain-the-largest-income-sources-for-the-sector-however-in-201617-overall-growth-was-driven-by-grants-and-investments> (Accessed: 15 October 2019).
- [7] See for example, Rindova, V., Barry, D. & Ketchen, D.J., 2009. Entrepreneurship as emancipation. *Academy of Management Review*, 34(3), 477–491.
- [8] Ibid, p.478.
- [9] Singh, S., Corner, P. D. & Pavlovich, K. 2015. Failed, not finished: A narrative approach to understanding venture failure stigmatization, *Journal of Business Venturing*. 30(1), 150–166. p.151.
- [10] Wakeman, S.E. & Rich, J. D. 2018. Barriers to Medications for Addiction Treatment: How Stigma Kills. *Substance Use and Misuse*, 53(2), 330–333.
- [11] Watson, J. and Cuervo, H. 2017. Youth homelessness: A social justice approach. *Journal of Sociology*, 53(2), 461–475.
- [12] Brisman, A., Carrabine, E. and South, N. 2017. *The Routledge companion to criminological theory and concepts*. Routledge. p.177.
- [13] Ibid.

- [14] Home Office (2019) 'Drug misuse: Findings from the 2018/19', Crime Survey for England and Wales, (September). doi: 10.1038/sj.ki.5001982.
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832533/drug-misuse-2019-hosb2119.pdf
- [15] Office for National Statistics (2018) Adult drinking habits in Great Britain:2017, Office for National Statistics. Available at:
<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/drugusealcoholandsmoking/bulletins/opinionsandlifestylesurveyadultdrinkinghabitsingreatbritain/2005to2016>.
- [16] Ricciardelli, R. and Mooney, T. 2018. The decision to disclose: Employment after prison. *Journal of Offender Rehabilitation*. Routledge. 57(6), 343–366.
- [17] Ibid, p.353.
- [18] Office for National Statistics (2019) Personal well-being in the UK: April 2018 to March 2019. Available at:
<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/measuringnationalwellbeing/april2018tomarch2019#main-changes-over-time-life-satisfaction-and-anxiety>
- [19] Ministry of Housing Communities and Local Government (2019) The English Indices of Deprivation: Statistical Release. Available at:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/835115/IoD2019_Statistical_Release.pdf
- [20] Blinder, S. & Jeannet, AM. 2018. The 'illegal' and the skilled: effects of media portrayals on perceptions of immigrants in Britain, *Journal of Ethnic and Migration Studies*, 44(9), 1444–1462
- [21] Matthews, J. & Brown, A.R. 2011. Negatively shaping the asylum agenda? The representational strategy and impact of a tabloid news campaign. *Journalism*, 13(6), 802–817. P.813
- [22] NCVO 2019. Executive summary | UK Civil Society Almanac 2019. Available at:
<https://data.ncvo.org.uk/executive-summary/#the-public-and-government-remain-the-largest-income-sources-for-the-sector-however-in-201617-overall-growth-was-driven-by-grants-and-investments>
(Accessed: 15 October 2019)
- [23] Crime Survey for England and Wales, 2018. Crime in England and Wales: Year Ending December 2018, Office for National Statistics.
- [24] Allen, G., Audickas, L., Loft, P. & Bellis, A. 2019. Knife crime in England and Wales. Available at:
<https://researchbriefings.parliament.uk/ResearchBriefing/Summary/SN04304#fullreport>
- [25] Wood, R. 2010. UK: The reality behind the “knife crime” debate. *Race and Class*, 52(2), 97–103.
- [26] Ibid, p.97.
- [27] Vulliamy, P. et al. 2018. Temporal and geographic patterns of stab injuries in young people: a retrospective cohort study from a UK major trauma centre. *BMJ Open*.
- [28] Roberts, S. 2019. The London killings of 2018: the story behind the numbers and some proposed solutions. In *Crime Prevention and Community Safety*. Palgrave Macmillan UK, 21(2), 94–115.
- [29] Burstein, P. (2003) 'The impact of public opinion on public policy: A review and an agenda', *Political Research Quarterly*, 56(1), pp. 29–40. doi: 10.1177/106591290305600103.
- [30] Maruna, S (2011) Reentry as a rite of passage: *Punishment & Society*, 13, pp. 3–28
- [31] Kirkwood, S. and McNeill, F. (2015) 'Integration and reintegration: Comparing pathways to citizenship through asylum and criminal justice', *Criminology and Criminal Justice*, 15(5), pp. 511–526. doi: 10.1177/1748895815575618. p.521
- [32] Ibid, p.517
- [33] Powell, J. & Menendian, S. 2016. The Problem of Othering: Towards Inclusiveness and Belonging. *Belonging and Belonging*. Issue 1. Available at: <http://www.otheringandbelonging.org/the-problem-of-othering/>

- [34] Powell, J. 2017. Us vs them: the sinister techniques of 'Othering' – and how to avoid them. The Guardian. <https://www.theguardian.com/inequality/2017/nov/08/us-vs-them-the-sinister-techniques-of-othering-and-how-to-avoid-them>
- [35] Davis, C., Bahr, S. & Ward, C., 2012. The process of offender reintegration: Perceptions of what helps prisoners reenter society. *Criminology & Criminal Justice*, 13(4), 446-469. p.459
- [36] Russell, L. (2016) 'The realities of being young, unemployed and poor in post-industrial Britain', *Power and Education*, 8(2), pp. 160-175. doi: 10.1177/1757743816651896.
- [37] Maruna, S., 2001. *Making good: How ex-convicts reform and rebuild their lives*. Washington DC: American Psychological Association.
- [38] LeBel, T., Burnett, R., Maruna, S. & Bushway, S., 2008. The 'Chicken and Egg' of Subjective and Social Factors in Desistance from Crime. *European Journal of Criminology*, 5(2), 131-159.
- [39] Ibid, p.137.
- [40] Pritchard-Jones, L. 2018. "Adults at risk": "vulnerability" by any other name?. *The Journal of Adult Protection*, 20(1), 47-58
- [41] Ibid, p.50.
- [42] Rindova, V., Barry, D. & Ketchen, D.J., 2009. Entrepreneurship as emancipation. *Academy of Management Review*, 34(3), 477-491.